

School Readiness in Children with Special Needs

Simcoe County 2009-2010

SPECIAL NEEDS & SPECIAL PROBLEMS

SCHOOL READINESS AS ASSESSED BY THE EDI, SIMCOE COUNTY 2010

Introduction

This document discusses the results of the 2009-2010 implementation of the EDI (Early Development Instrument) in Simcoe County in terms of children with special needs, non-diagnosed children with suspected/observed issues. Visit www1.e3.ca then go to OEYC Data Resources for more information on the EDI in Simcoe County. This analysis and discussion is intended to give local service providers including school boards, Early Years, Early Intervention, mental and public health the data that will elicit productive discussion, collaborative and strategic planning.

Defining Terms

Special Needs Children:

In the demographics section, question 7 of the EDI asks if the child has a Special Need. Teachers are instructed that in order to check off this question they must have knowledge of the diagnosis based on commonly known information from the parent/caregiver. Since schools have usually not completed their own formal assessments in SK, special needs are usually those that the child has had diagnosed through early intervention, the family physician, or are very evident from birth or through family history. It is made clear that this is not the place for teachers to talk about their own observations or suspicions. This cohort of children are analyzed separately in the full EDI report.

Children with Special Problems:

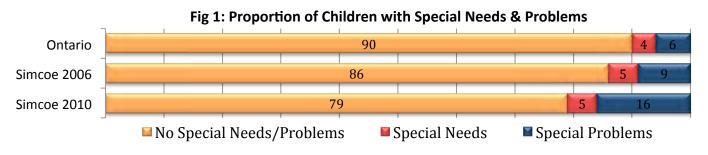
In section "Special Concerns" (Section D) teachers are asked if "the child has a problem that affects their ability to do school work in a regular classroom" Yes/No. During training it was indicated to teachers in Simcoe that this was their opportunity to identify children that they have concerns about or suspect they may have undiagnosed special needs. This designation should be made only in the case that the problem is sufficient as to affect their ability to do work in a regular classroom. In all other EDI reporting these children are analyzed with all other children without diagnosed special needs.

Children with no Special Needs or Problems:

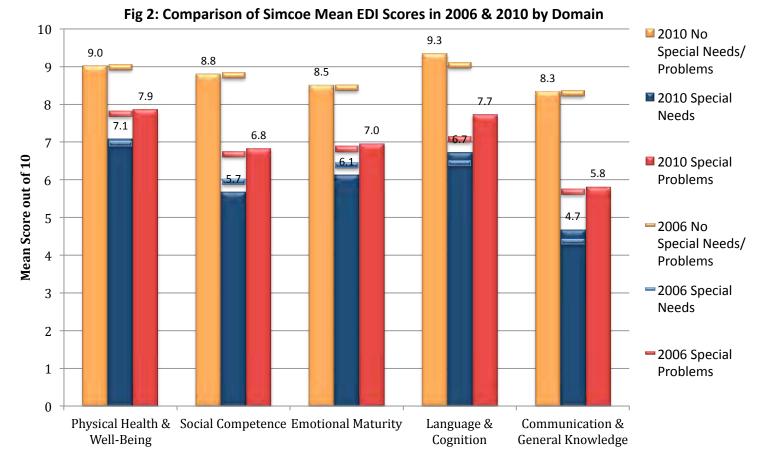
These are the children without a diagnosed special need who have also not been checked off as having a "problem which affects their ability to do work in a regular classroom."

Frequencies of Children in Simcoe County

According to the EDI, 5.3% of Simcoe children have diagnosed special needs and 16% with special problems affecting their work in a regular classroom. In 2006 we also saw higher numbers than Ontario and it was thought that this was because teachers were told that this was their "opportunity" to identify needs in the classroom. In 2010, Simcoe's numbers are even higher even though training was given in exactly the same manner. Front line workers and teachers should discuss further what they are observing that may explain such a significant increase in problems in the classroom among Simcoe SK students.



Results by Domain



This graph represents the average EDI score out of 10 for the three groups: Children with no special needs or problems (orange), children with special problems in the classroom (red), and identified special needs (blue). In the last EDI report for Special Needs in 2006 the Ontario scores were reported with local results. Those results showed how our children in most cases were doing better in all three categories as compared to their Ontario counterparts. In this graph we are showing our 2006 results as compared to our 2010 results.

This graph tells us several things:

- The columns (Simcoe 2010) compared to the corresponding dashes (2006) tells that there have been little change in school readiness from 2006 to 2010 among groups. However, the most significant changes are reflect in language & cognition with children in all three groups doing even better.
- The second trend that can be seen when looking at this graph is the relative stability of children with no special need or problems (orange) and children with special problems (red). As for the children with special needs (blue) we can see that children in 2010 with special needs are scoring lower in social competence and emotional health and well being, while scoring higher than the 2006 student in language and cognition and communication and general knowledge. Although these changes in scores are notable they should be interpreted with some caution as the sample size of children with special needs is smaller than those in the other two groups and therefore more sensitive to individual differences which may skew results.
- The wide range in the mean scores between special needs (blue) and problems (red) and children with no needs or problems (orange) shows the opportunity for improvement in the red and blue groups. How would EDI scores differ if we knew which children would later have problems in the classroom; and if all children requiring assessments, interventions, or simply resources or parenting support were served earlier on? What does this data tell us?

Geographic Distribution of Special Needs and Special Problems Across Simcoe County

Interpreting Special Needs Maps

The first two blue maps show the number of special needs children as divided by the total number of SK children in a given EDI neighbourhood. Community partners have raised several ideas about why certain areas may have higher proportions of children with special needs. Thinking about the "whys" has been an excellent start for community conversation. Potential explanations for higher proportions of children with special needs in a given EDI neighbourhoods may include:

- 1. A higher incidence of children with special needs, may be either because families are giving birth to more children with special needs (due to a wide variety of reasons), or because families with special needs children are moving into a given community (potentially to receive supports for their child). In some cases it could be difficult to determine whether families are moving to areas with services and supports; or whether these supports were targeted to communities already demonstrating a need.
- 2. More frequent screening or better detection of children resulting in a higher proportion of children special needs in a given community.

It is up to service providers, schools boards, health, and early intervention to discuss their experiences and determine what may be happening in a community or if anything further needs to be done.

Interpreting Special Problems Maps

The red maps for special problems puts another layer onto the discussion of special needs. This item was not dependent on diagnosis, and therefore was up to the interpretation of the teacher to determine if the child was having a problem that was influencing their ability to do school work in a regular classroom. Notice on these maps how much higher the scale ranges in terms of percentages of children. Each neighbourhood has between 50 and 100 SK students living in it and therefore the effect of individual teacher bias is reduced with the compilation of multiple teachers, schools, and often boards in any one neighbourhood.

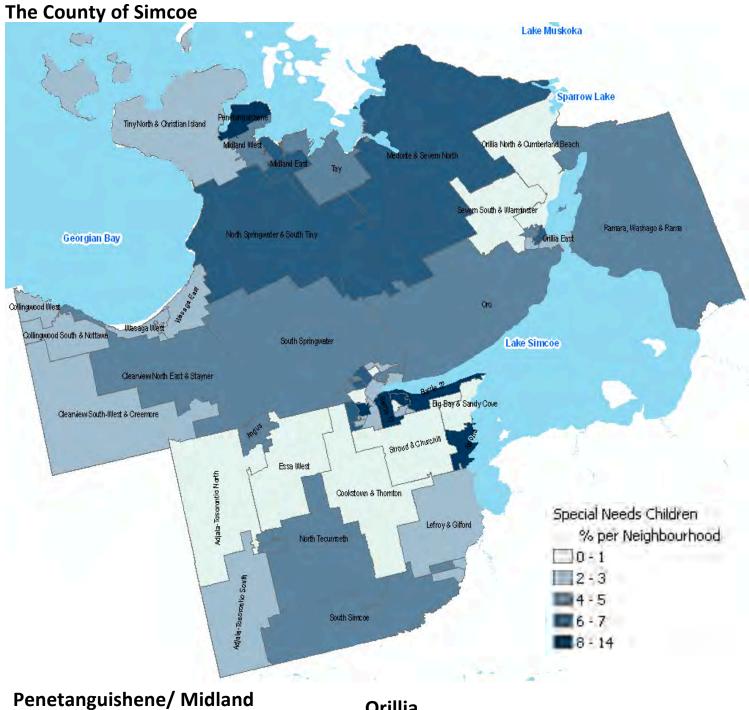
Using Special Needs and Special Problems Maps Together

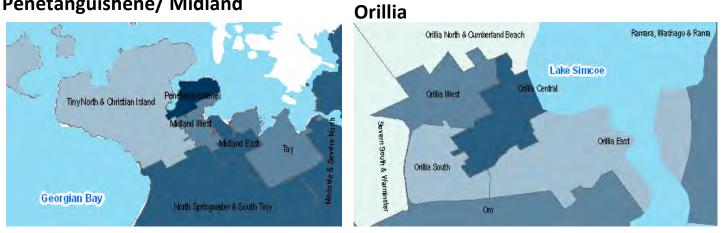
Considering the two sets of maps together further explains what may be happening in a given community. Some examples are provided below as to how this information could be interpreted:

- EXAMPLE 1 Neighbourhoods that are high (dark) both in special needs and problems indicates higher overall incidence.
- EXAMPLE 2 Neighbourhoods with few diagnosed special needs (light blue) but relatively more suspected issues (darker pink to red) could benefit from more screening or support.
- EXAMPLE 3 Neighbourhoods with higher special needs (med to dark blue) but relatively few special problems (light pink) could mean detection and diagnosis is taking place with few children being missed.
- EXAMPLE 4 Neighbourhoods that are low (light) in both maps demonstrating there are few diagnosed needs with this group as well as few suspected issues.

When considering areas with a higher proportion of special problems it is important to remember that children in this category were less likely to have hearing, visual or physical issues but more likely speech language, learning, behavioural and problems at home. The section on further assessment details what types of further assessment is needed for these children without diagnosis from the teacher's perspective.

Map Set 1: Special Needs by EDI Neighbourhood





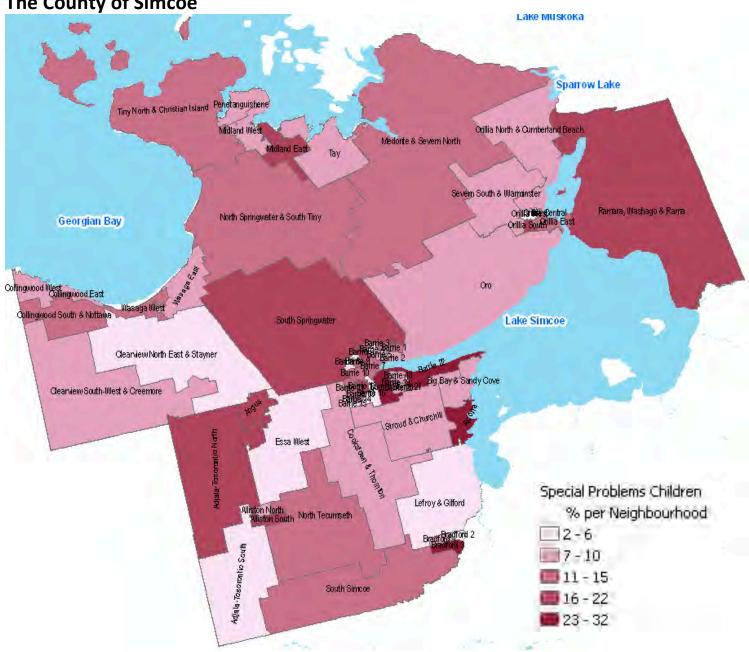












Penetanguishene/ Midland



Orillia











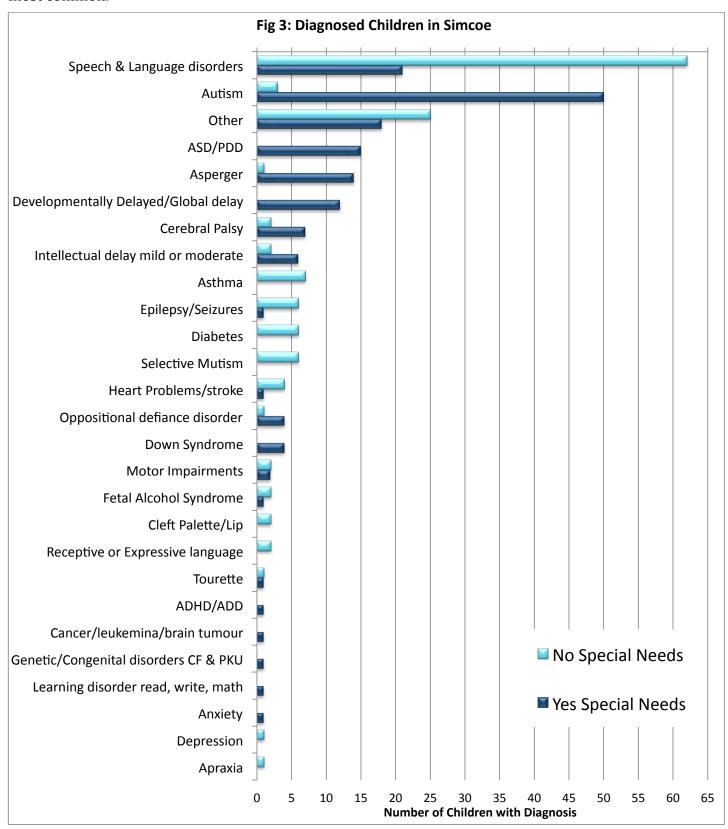
Changes to Neighbourhoods since 2006

	% Special Needs	% Special Needs	% Special Problems	% Special Problems
Neighbourhood	2010	2006	2010	2006
Adjala-Tosorontio North	1% 🗸	3%	21%	14%
Adjala-Tosorontio South	6%	2% ^	15%	4% ^
Alcona	5%	3%	13%	12%
Alliston North	6%	5%	16%	5%
Alliston South	7%	5%	31% !	8% ^
Angus	6%	4%	29% !	25%
Barrie 1	5%	2%	15%	20%
Barrie 10	1% ✓	9%	17%	10%
Barrie 11	7%	2% 🛧	14%	10%
Barrie 12	11%	2% ^	21% !	17%
Barrie 13	6%	2%	22%	10% 🔨
Barrie 14	5%	4%	20%	13%
Barrie 15	10% !	7%	3% ✓	10%
Barrie 16	4%	4% ₩	9% 🗸	9%
Barrie 17	10% !	9%	28% !	23%
Barrie 18	13% !	6%	13%	7%
Barrie 19	0% ✓	9%	27% !	3% ^
Barrie 2	6%	4%	18%	20%
Barrie 20	5%	5%	13%	11%
Barrie 21	3% ✓	2%	19%	13%
Barrie 22	7%	5%	16%	13%
Barrie 3	4%	3%	14%	14% 🖖
Barrie 4	2% ✓	4%	10% 🗸	20%
Barrie 5	7%	11%	17%	15%
Barrie 6	7%	9%	21%	13%
Barrie 7	4%	2%	22% !	11% ^
Barrie 8	10% !	0% 🛧	12%	12% 🔻
Barrie 9	8% !	10%	19%	21%
Big Bay & Sandy Cove	0% 🗸	6%	28% !	8% ^
Bradford 1	5%	2%	9% 🗸	16%
Bradford 2	7%	4%	7% ✓	13%
Bradford 3	3% ✓	2%	24%	11% ^
Clearview North East & Stayner	5%	4%	8% ✓	14%
Clearview South-West & Creemore	3%	5%	14%	9%
Collingwood East	8% !	9%	18%	13%
Collingwood South & Nottawa	3%	7%	17%	15%
Collingwood West	4%	5% ♥	9% ✓	9%
Cookstown & Thornton	1% 🗸	4%	10% ✓	12%
Essa West	0% 🗸	7%	11%	16%
Lefroy & Gilford	4%	4% ♥	5% ✓	9%
Medonte & Severn North	8% !	6%	15%	7%
Midland East	7%	2% 🌴	19%	17%
Midland West	9% !	7%	17%	23%
North Springwater & South Tiny	5%	5% ₩	13%	10%
North Tecumseth	4%	5%	12%	15%
Orillia Central	11% !	16%	23% !	16%
Orillia East	3%	4% ↓	19%	19% 🖖
Orillia North & Cumberland Beach	2% ✓	6%	17%	19%
Orillia South	4%	4% ↓	24% !	25%
Orillia West	13% !	14%	13%	20%
Oro	5%	8%	8% ✓	14%
Penetanguishene	10% !	9%	9% ✓	26%
Ramara, Washago & Rama	4%	3%	18%	19% ♥
Severn South & Warminster	0% ✓	3%	16%	16% ♥
South Simcoe	4%	3%	11% 🗸	14%
South Springwater	3%	2%	18%	16%
Stroud & Churchill	0% 🗸	0%	22% !	15%
Тау	5%	9%	12%	21%
Tiny North & Christian Island	4%	2%	18%	25%
Wasaga East	6%	7%	15%	18%
Wasaga West	3%	4%	16%	12%
			-	

Legend: ✓ or ! Denotes that 2010 scores are in the top/bottom 80th %ile for 2010. ↑/Ψ denotes largest changes since 2006.

Diagnoses for Children in Simcoe County

One significant change from the EDI from 2006 is that the 2010 version not only asked about special needs or problems but also asked teachers to identify specifically the diagnoses that children have. All types of children have diagnosis. For children with Special Needs the most common diagnosis is Autism and for children without special needs (with or without special problems), speech and language disorders are the most common.



Types of Problems in the Classroom

When asked about the type of problem the child is having either with regards to special problems in the classroom the following were identified. In 2010 not only observed problems but also diagnosed problems were differentiated so these are provided below.

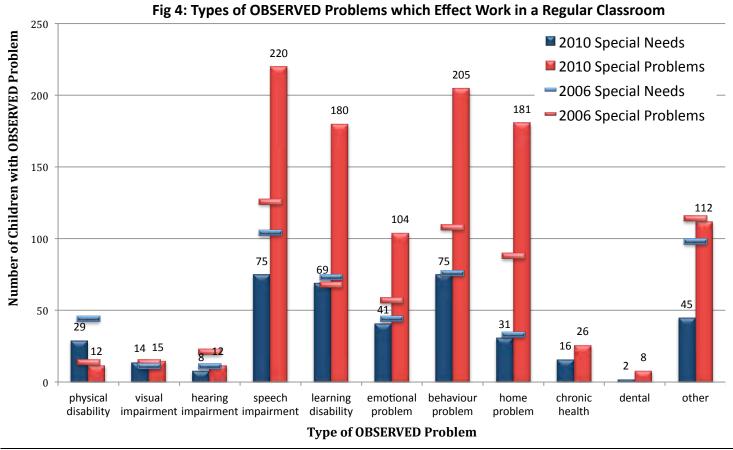


Fig 5: Types of DIAGNOSED Problems which Effect Work in a Regular Classroom 100 95 ■ 2010 Special Needs Number of Children with DIAGNOSED Problem 90 ■ 2010 Special Problems 80 70 60 53 50 37 40 28 28 30 26 24 19 20 ¹⁴ 12 12 11 10 10 2 2 0 physical hearing speech learning emotional behaviour home chronic dental other visual disability impairment impairment impairment disability problem problem problem health

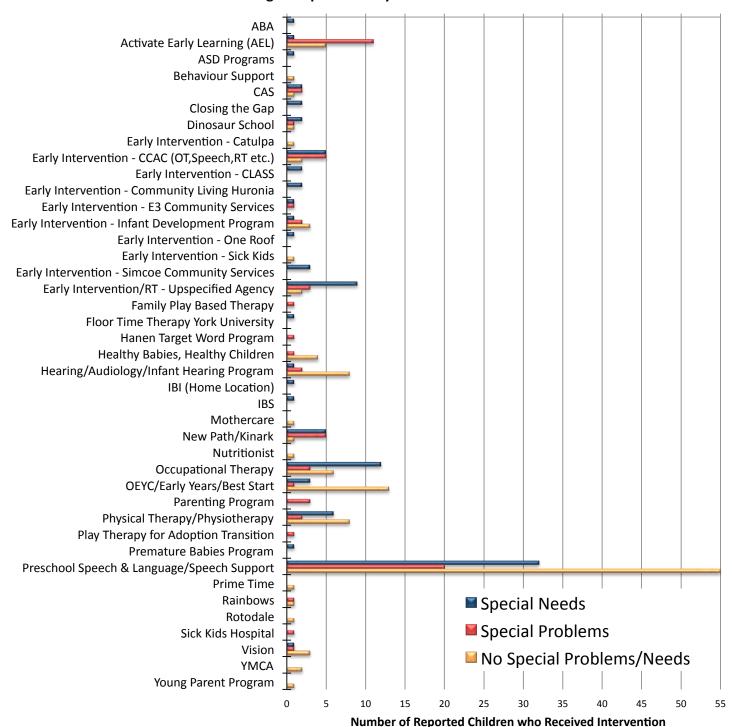
Type of DIAGNOSED Problem

Early Intervention

Below you will find a breakdown of how many children in each of the three categories received Early Intervention and/or school based support. Fig. 6 shows the inventory of early intervention services specified for children in all three categories. In the future analysis may be clearer if there was a drop list available for teachers specific to either categories of intervention or agencies providing this type of service instead of open ended "if so, please specify:"

	No SN or	% of No	Special	% of SP	Special	% of Total
	SP	SN/SP Group	Problems	Group	Needs	SN Group
Total number of Children	3587		731		242	
Received Early Intervention	144	4.9%	88	15.7%	104	43.0%
Receiving School Based Support	93	2.6%	232	31.7%	171	70.7%

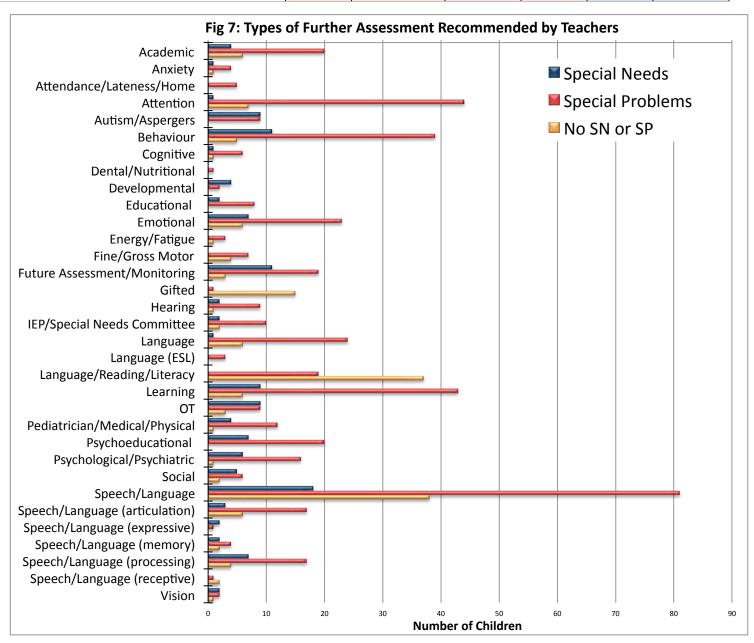
Fig 6: Reported Early Intervention



Further Assessment

When asking about whether or not the child requires further assessment the results for the three groups are as follows. In Fig. 7 there has been an attempt to categorize the types of further assessments mentioned by teachers to give planners an overview. However these categories are not mutually exclusive and many children had a list of suggested further assessments. School boards should have, and may already, procedures in place to ensure that teachers know the next steps for each of these suggested further assessments. In order to give the full details needed for planning around school age assessments, the raw data has been provided in Appendix 1. In addition, it is suggested that future versions of the EDI have preset categories for further assessment to facilitate clear analysis. In many cases teachers reiterated the needs of the student, perhaps unsure of the correct assessment required.

	No SN	% of No	Special	% of SP	Special	% of Total
	or SP	SN/SP Group	Problems	Group	Needs	SN Group
Total number of Children	3587		731		242	
Currently receiving further assessment	29	0.8%	124	17.4%	87	36.0%
Currently on a wait list	33	0.9%	94	13.3%	67	27.7%
Feel that child needs further assessment	161	4.5%	443	64.0%	125	51.7%



Future Research & Community Mobilization

The 2010 EDI now includes clarification of whether problems are diagnosed or suspected. Categorizations have also added to explain diagnoses more accurately. During teacher training better examples were also given as to what types of problems should be considered "Other". Visit www1.e3.ca and go to OEYC Data Resources to view the 2010 EDI. It is also recommended that those designing the EDI create categories for further assessment and Early Intervention to facilitate the ease of analysis. Meanwhile, the provision of the raw data should give planners for the board and community agencies ample information about strategies that need to be created for children who are being observed with the range of issues in Appendix 1.

In terms of community mobilization, it is recommended that agencies and committees who serve children with special needs assist us in creating better categories for "further assessment required". Creating a collective plan of the protocols to be taken when teachers or Early Years professionals observe certain situations would be also very helpful. Finally, each community agency should be looking at the maps to target services to the data presented. If assistance is required facilitating or creating an action plan, use the contact information below. Thanks you for your ongoing efforts to support Simcoe County's children.

FOR MORE INFORMATION OR EVALUATION SUPPORT CONTACT SIMCOE'S DATA ANALYSIS COORDINATOR AT DAC@E3.CA OR 705-445-6351 x229.

Appendix 1: Full Comments for Children Identified as Requiring Further Assessment

When asked about the types of further assessment needed these below were identified by teachers. Some sorting of this data has been done but an attempt has been made to keep it in the more basic form as to reflect the variety and combinations of assessments required. Where the type of assessment is not known the teacher has indicated the type of problem or suspected diagnoses for what they are seeing. It is hoped that the provision of the data in this more raw data format will allow planners and service providers in the community and the school boards to discuss and create/revisit strategies for these types of needs. Where numbers are seen in brackets it indicates the repeat frequency of this exact response.

- a doctor's diagnosis re: behaviour concerns
- A few articulation issues
- a language assessment would be beneficial
- ABA
- ABA language / communication
- able to read and write but struggles emotionally
- academic assessment
- Academic Assessment due to poor working memory
- academic difficulties with reading and writing
- Academic Progress
- academic testing
- academic testing and speech
- academic, social, behavioural
- Academic/Progress Concerns
- academically behind
- academically very low/learning disability?
- académique
- acquisition de la langue
- Active Early Literacy program with Special Ed. te
- ΔDD2
- ADD/ADHD a language disconnect see (2k)
- ADD/ADHD testing
- ADHD
- ADHD monitoring / assessment Reading Recovery
- AEL for shyness

- an IEP needs to be fine tuned for this student
- Anger management, empathy development
- anxiety
- anxiety is building during certain times
- anxiety issues
- Anxiety or Sensory disorder or Aspergers/ PDD???
- areas of reading and writing
- as above. will be getting speech therapy soon.
- as confidence develops, so does his skill level
- Aspergers-pediatrician pending
- assess memory/learning delays
- assess progress in particular sound development
- Assessment by a speech and language pathologist
- assessment for a learning disablility
- Assessment for attention disorder/psych assess
- Assessment for Autism Spectrum Disorder
- Assessment for Autism Spectrum Issues
- assessment for dislexia
- assessment will be ongoing throughout school
- assessments to determine what issues are present
- assistance in literacy & numeracy
- assistance in speech therapy & reading recovery
- at risk review in fall
- at risk will again in fall.

- Attendance has been an issue; need to monitor
- Attention
- attention deficit
- attention deficit and Occupational therapy
- attention disorder, processing
- attention impulsivité opposition hyperactivité
- Attention issues
- attention issues, hyper activity
- autism spectrum disorder-perhaps Asperger's
- Awaiting results for family doc's assessment of emotional outbursts, Speech will reasses.
- Bahavioural and Academic
- behaviour
- Behaviour
- Behaviour (maybe ADD?)
- Behaviour and emotional issues need identification
- behaviour has not improved much from medication
- behaviour intervention or counselling
- behaviour intervention program
 - behaviour is unstable, especially with someone new
- behaviour masks language deficiencies
- behaviour should continue to be monitored
- behaviour/emotional
- Behaviour/Social Issues

- behavioural
- Behavioural and Learning Disability
- behavioural assessment for ODD, and/or ADHD
- behavioural consultation, psycho-educational
- BEHAVIOURAL PROBLEMS, CHRONIC LATENESS
- behavioural testing, though behavior is manageable
- being assessed for ADHD privately
- Below expected level in many areas- very weak
- below grade level
- cannot work independently in any Language or
- CCAC was supposed to assess speech
- certain sound substitutions
- check for aspergers/learning disability/ADD
- Check for autism disorder
- child does not retain information, attention issue
- child has severe language disability
- child isn't able to demonstrate skills needed SK
- Child needs an IEP
- child needs reading and language support
- child psychologist for emotional issues
- Child will need further speech intervention in G-1
- clarification of diagnosis / autism or aspergers
- cognitive / language assessment
- completed AEL program and will be watched closely
- . continue speech and language
- continue speech, processing info
- continue to monitor academic progress
- Continue to monitor his progress.
- continue to monitor in grade 1
- continue to monitor in grade one
- . continue to monitor in Grade one
- continue to monitor in grade one
- continue to monitor speech (letter r etc.)
- continue to monitor speech concerns
- continue to monitor speech concerns Letter r etc. •
- continue with speech and language therapy
- continued assessment for stuttering
- continued monitoring by speech/language pathologist
- Continued monitoring of speech problems
- continued speech support
- continued support
- Continued support for speech development
- Counseling for emotional issues
- counseling / psychological assessment
- counseling services or psychiatrist/psychologist
- Current Issues have made learning almost impossible
- currently in AEL program
- currently in AEL program and making progress
- currently in speech
- Defiance, Exteme Aggressive Outbursts
- dental, nutritional, home support,
- Developmental and Physical, Emotional assessment

- developmental delay
- developmental/cognitive skills
- diagnosis or rule out autism
- difficulties with processing information
- difficulty with basic reading and numeracy skills
- difficulty with reading, perhaps a process problem
- distractibility
- to determine academic ability
- Doctor will reassess when he's 8.
- E.A. on school yard to monitor behaviour.
- Early reading intervention candidate
- Early success program in grade 1
- easily distracted and needs frequent reminders
- Educational Assessment
- Educational assessment, language assessment
- educational assistant is needed when outside
- educational testing / K tea required
- emotional (passive aggressive?)
- emotional & academic problems are extreme
- emotional and behavioural
- emotional assessment
- emotional issues does not like school
- **Emotional Problems**
- emotional stress -- withdraws in class --
- **Emotional testing**
- Emotional/Home Concerns
- Emotional/Home Issues
- ENT assessment/Psychometric Assessment
- ESL assessment for support
- eventually to determine processing difficulties
- eventually to determine specifics in abilities
- everything
- expressive/receptive language
- eyes/ears checked as well as SERT followup
- eyesight appears to getting progressively worse
- family doctor for his behaviour (home/school)
- Feel there will be improvement once done sp. th.
- fetal alcohol syndrome? ADHD?
- Fine motor and language assessments
- Fine motor issues--would benefit from OT?
- Follow up with family doctor
- follow-up in grade 1.
- for a possible learning disability
- for attention issues
- for behaviour problems / low academic achievement.
- for focus and learning disability
- for inability to remain focused on given tasks
- For learning disabilities
- for odd/add and learning disability
- for possible learning disability
- for processing information-obtaining concepts.
- Formal Assessment for Asperger's
- formal assessment to be done next school year
- formal identification process is ongoing

- Full Psycho-Ed. assessment
- further ASD assessment, Occupational Therapy
- further assessment in expressive language
- further observation of child's thinking (negative)
- further speech language & learning skills
- Further testing for possible LD.
- further visual assessment
- future psycho-educational testing
- gifted
- Gifted
- giftedness
- Giftedness
- Grade 1 Early Success Program
- Grandma can't afford-would like Psych assessment
- Had speech therapy. Could use some more.
- has been referred to a pediatrician
- has communicative and cognitive difficulties
- has coping strategies but is easily frustrated
- . have indicated to parents about speech
- He could use an updated OT assessment.
- . He forgets information incredibly quickly.
- . he has difficulty processing information, (ESL)?
- He has received Articulation help in the past.
- He is difficult to understand/effecting school
- he is having difficulty learning how to read
- He need a psycho-educational assessment He needs further assessment in language
- He needs further assessment in language.
- . he needs help with speech and language issues
- He needs to continue to have speech assessment.
- He often shakes when holding a pencil or crayon
- He should be tested for a learning disability.
- He will need to be re-assessed for speech in Gr.1.
- hearing assessment
- hearing assessment and ADD assessment
- hearing loss needs to be addressed/behavioral?
- hearing test recommended- waiting for assessment.
- Hearing Test, Language Assessment
- hearing, speech and rainbows (grief counselling) hearing/learning disability? letter/sound match
- . His behaviour has affected academic areas
- . His inattention and impulsivity = ADHD?
- How has blocked ear canals affected hearing/speech
- I feel child will be identified as gifted.
- I recommend she is screened for gifted in future
- I think he may be immature and not ready yet
- I think she is in need of a psych assessment.
- I would suspect a learning disability.
- . identify what causes inability to focus and try to
- IEP will need to be fine tuned for this student If difficulty with Language continues, psch. ed
- if fine-motor skills fail to develop with maturity
- impulsive, rocking behaviour, inattentive behaviour

- Impulsivity, Aggressiveness, Restless, Defiance
- Impulsivity, Inattentiveness, Aggressiveness
- In AEL, early success for grade 1 ???
- In AEL, maybe need early success in grade 1
- In AEL, will maybe need early success for gr1
- in the future gifted testing
- in years to come.
- intellectual / developmental assessment
- Involved in the Rainbows program #4
- is not close to meeting SK expectations
- keep an eye on reading / writing abilities in gr1
- kinark, cas,
- Kindergarten Assessments scores low
- language
- Language
- language, math
- language and processing skills
- Language Assessment
- Language assessment, psycho-educational
- language assessment/psycho-educational
- Language has difficulty with some concepts
- language processing
- language processing, behavioural, sensory
- Language Related Reading and Writing
- language skills
- Language Skills low need future testing & Speech
- language skills- reading and writing
- Language support through the School Board
- Language/Cognitive Assessment
- Learning and Developmental Delays
- learning difficulties academic
- Learning Disability?
- Learning Disability/ Behavioural
- learning disability/behavourial/lack of attention
- learning disorder
- learning problems, social/behavioural problems
- learning skills (reading)
- Letter ID very low for age.
- likely gifted screening in Grade 4
- likely need review and continue of SP/L program
- Limited language skills, processing skills
- lots of difficulty when writing
- Low academic achievement
- Low academic achievement, slow to grasp concepts.
- Low energy/slow, suspect ADD, inattentive
- Maman fait rendez-vous chez un pédiotre
- May have ADHA
- may have an LD
- may have learning disability
- may need an IEP in future
- may need further speech assessment
- may need possible speech intervention
- may need some literacy support
- may need speech therapy in the future/ may outgrow
- may need to be tested for ADHD

- may require on-going speech and language assessment
- mental health
- MID, ADHD
- mild articulation
- minor articulation
- mom continues to seek medical support
- mom is taking him to dr. re anxiety.
- Mom says assessments are underway????
- monitor
- monitor for academic & social/emotional develp't
- monitor for future attention deficit disorder
- monitor for gifted assessment in grade 3
- monitor for gifted screening in grade threemonitor his behaviour (impulsivity) ADHD??
- monitor situation
- monitor social/emotional well-being
- monitor, speech
- monitoring for Speech/Language- articulation
- monitoring growth/difficulties with left leg
- more indepth and up to date assessment needed
- more regular speech support
- More SERT support for early literacy skills.
- More specific identification through pediatrician
- more speech through the school
- Need medical note from doctor before proceeding
- needs cognitive and fine motor assessments
- needs diagnosis for educational support
- needs diagnosis to assist educational system
- needs further speech and language assessment
- needs glasses, won't wear them.
- Needs more speech intervention
- needs psychological assessment!!!needs speech assessment and will need help
- needs speech support
- needs to be checked for ADD
- no assessment action taken by parents since fall
- not progressing as he should, something's going
- Not progressing, Not able to focus on tasks
- not quite sure why inability to focus and concen.
- O/
- obtaining information, processing concepts.
- occupational
- ODD/ADD/Pampered Child Syndrome?
- On going speech assistance and LD?
- on meds, monitored by doctor
- on waitlist for behaviour assessment
- ongoing
- ongoing language and OT support(assess. & program)
- ongoing OT support
- ongoing speech
- ongoing speech checks as he ages
- oral language
- OT
- OT, SL, IBI,
- outside assessments recommended

- parents are seeking medical diagnosis
- Parents think fine, some pronunciation errors
- parents will assess him in new school next year
- Part of Pilot project for language by Speech Path
- pediatric assessment
- pediatric assessment
- pediatric assessment/in school assessments
- pediatrician for emotional and physical health
- pediatrician observing for possible ADHD
- pediatrician referral
- Perhaps an assessment to look at working memory
- perhaps LD- some processing issues (in AEL)
- psychological testing
- physio toes in, one foot drags sometimes
- poor gross motor skills and sense of balance
- Possible ADD
- possible ADD/ADHD
- possible Asperger's Syndrome
- possible attention deficit disorder
- Possible attention difficulties
- possible autism. LD
- Possible LD for processing language
- possible learning disability
- Possible learning disability
- Possible OT
- possibly a case conference
- possibly articulation --uncertain
- possibly for ADHD
- possibly in future for language concerns
- potential for gifted screening in Grade 3
- Probable learning disability
- processing and obtaining concepts.
- processing instructions, retaining info
 pscho-educational assess repeat; more speech assis
- psych assessment
- Psych. Ed. evaluation
- Psycho Educational Assessment/Pediatric Assessment
- psycho-ed, giftedness
- psycho-ed, gilledhess
- psycho-educational assessment
- psycho-educational, language assessmentpsycho/educational assessment
- Psycho-educational Assessment
- Psychological and behavioral assessment
- psychological assessment
- psychological, behaviour is more than just
- psychiatric evaluation
- psychological testing; selective mutism
- reading
- reading and writing
- reading readiness for gr.1, may require LC in future
- Reading Recovery
- reading/language skills/hearing
- Reading/Writing/Oral low, future?

- reassess for specific causes of lack of progress
- reassessed next year
- receives frequent assessments at Sick Kids
- Receptive language
- Receptive language assessment
- recognizes numbers to 5; reading at PM Level 2
- recommendation was to monitor progress
- Recommended for assessment by Pediatrician
- recommended to assess for OT due to low fine motor
- renew CCAC for OT, speech, communication devices
- requires Psych Consult and Occupational Therapy
- retest for hearing once infection is clear
- review in fall
- review in fall at partial risk.
- school councillor to deal with divorce
- scored low on SCDSB oral language test
- see a doctor re: behaviour diagnosis
- seek reason for complete lack of initiative
- Self-abusive behaviour being monitored.
- severe speech problems
- She is going to grade one & needs to be identified
- she is on a behaviour plan- improving lately
- she may need reading recovery
- she needs a formal assessment
- she needs behavioural assessment
- She needs much individual assistance.
- She tends to be a relationship bully.
- Should be evaluated for Asperger's
- Should be evaluated for learning disability
- Should be tested for autism
- should be tested for learning disabilities
- Should evaluate for autism/mental health issues
- should outgrow like sibling
- Shows markers for OCD
- Shows signs of ASD
- Slight Speech Impairment
- slow academic progress, extremely shy/withdrawn
- small motor skills and language issues
- SNC for behavioural issues
- SNC for slow academic progress, little home support
- social assessment
- social skills during play due to hands on
- social; distractibility; adapting to changes;
- social/emotional testing, language assessment
- speech and O.T.
- some learning difficulties although improving
- Some speech problems should be assessed
- Special Needs Com. suggested referral at old school
- speech articulation
- speech has trouble formulating some sounds

- Speech (articulation)
- speech /lang therapy by school board
- speech and articulation
- speech and articulation, possible ADHD
- Speech and Langauge assessment
- Speech and Language (processing)
- Speech and Language and behavioural (emotional)
- Speech and Language Assessment (processing)
- speech and language assessment/learning disability
- speech and language processing
- speech and language support
- speech and language-articulation errors
- speech and language, behavioural
- speech and language, occupational therapy
- speech and language, OT
- speech and language/processing/retaining info
- speech and OT
- speech and possible LD
- speech articulation support
- speech assessment
- speech assessment (articulation)
- speech assessment and intervention for impediment
- Speech assessment may be needed.
- Speech Assessment, OT Assessment
- Speech for sound substitutions
- speech is weak, difficulty processing some info
- speech pathologist to monitor
- Speech services have not been provided as yet
- speech support is ongoing but very limited
- speech support would benefit this child
- Speech therapy, Rainbows program
- Speech Therapy, Social Skills Programming
- speech- articulation somewhat of a concern
- speech-articulation
- speech, cognitive testing
- Speech, depending on ear treatments
- speech, language and processing concerns
- speech, OT
- speech, processing, hearing
- Speech, reading
- speech/articulation: has improved recently
- speech/lang-word recognition/retrieval
- speech/language, medical ADHD
- struggles in language, and speech
- Special Needs Committee behaviour note
- suggestions made, needs diagnosis for ed. assist ■
- support from spec. ed. teacher may need in future
- support from special ed. teacher now and in future
- supporting learning needs and adjustment to school
- suspect ADD and a learning disability
 - SNC meeting required

- test for LD
- test for low I.Q./learning disability
- testing for ADD/ADHD
- testing for learning disability
- testing for special education support
- problems have had a large impact on learning
- there is an observed auditory processing delay
- There is something just not right.
- This is a recent diagnosis. Support is coming.
- This student will be checked on a regular basis.
- to address physical size-- losing weight
- to determine what his needs are
- to identify learning needs
- to update files as needed
- to update needs in the classroom
- undergoing now -very rare condition so far
- update results of testing
- very anxious sometimes even during routines
- very hard to understand his speech
- very inattentive, lacks eye contact
- Very intelligent, needs constant re-direction
- very lethargic and poor memory/retention
- very poor eyesight-must wears glasses
- very poor fine motor skills
- Vision and fine motor (printing specifically)
- vision, fine motor
- waiting for parent to give medical decision (ADD?)
- waiting to see if inattention due to immaturity
- waiting to see if inattention related to maturity
- waiting to see what pediatrician says
- waiting- is inattentiveness related to immaturity
- was on waiting list for speech
- We are suspecting some kind of learning disability
- weak literacy skills
- weak memory and reading skills-speech and
- Weekly support is needed for speech/language
- what are his home conditions?-follow-up needed
- when older
- why is he so fatigued
- will be followed & reassessed by Sert in grade 1
- will be reassessed Fall 2010
- will be recommended for Reading Recovery
- Will continue to need speech help into grade 1.
- Will need Reading Recovery in Gr. 1
- Will receive SERT support next year
- will recommend her for Reading Recovery
- language and some speech (lack of memory)
- social/emotional areas
- speech development and articulation
- working significantly below gd. level in all areas
- would benefit from further assistance in reading
- articulation skills and expressive lang